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Bib Data Sheet

CONFIRMATION NO. 2341

<b>SERIAL NUMBER</b> 10/714,707	<b>FILING OR 371(c) DATE</b> 11/17/2003 <b>RULE</b>	<b>CLASS</b> 340	<b>GROUP ART UNIT</b> 2821	<b>ATTORNEY DOCKET NO.</b> SYS-P-1270 (8364- 90589)
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## APPLICANTS

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\*\* CONTINUING DATA *None/MA*\*\* FOREIGN APPLICATIONS *None/MA*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 02/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IL	SHEETS DRAWING 6	TOTAL CLAIMS 48 37	INDEPENDENT CLAIMS 8 7
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>MA</i>				

## ADDRESS

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## TITLE

Strobe unit with current limiter

<b>FILING FEE RECEIVED</b> 2062	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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